

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	<b>213531392</b>					
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>PHOEBUS VOLUNTEER FIRE COMPANY, INCORPORATED</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>PHILIP L HATCHETT</b>  <b>11815 FOUNTAIN WAY, SUITE 400</b>  <b>NEWPORT NEWS, VA</b></p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>NEWPORT NEWS CITY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>VA</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>8/31/2013</b></p> <p>SCC ID NO: <b>07133457</b></p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED			
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<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 122 S. HOPE STREET</p> <p style="text-align: center;">CITY/ST/ZIP: HAMPTON, VA 23663-1845</p>							
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>							
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JAMES RONALD COLLINS  TITLE: PRESIDENT  ADDRESS: 311 FALMOUTH TURNING  CITY/ST/ZIP/CO: HAMPTON, VA 23669 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: JAMES RONALD COLLINS TITLE: PRESIDENT ADDRESS: 311 FALMOUTH TURNING CITY/ST/ZIP/CO: HAMPTON, VA 23669	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: JAMES RONALD COLLINS TITLE: PRESIDENT ADDRESS: 311 FALMOUTH TURNING CITY/ST/ZIP/CO: HAMPTON, VA 23669	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: RAYMOND E. MINGEE  TITLE: VICE PRESIDENT  ADDRESS: 1679 OLD BUCKROE RD  CITY/ST/ZIP/CO: HAMPTON, VA 23664 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: RAYMOND E. MINGEE TITLE: VICE PRESIDENT ADDRESS: 1679 OLD BUCKROE RD CITY/ST/ZIP/CO: HAMPTON, VA 23664	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JOHN ALEXANDER CIZMAR, SR.  TITLE: FIRE CHIEF  ADDRESS: 103 E HOWARD STREET  PO BOX 3548  CITY/ST/ZIP/CO: HAMPTON, VA 23663-0548 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: JOHN ALEXANDER CIZMAR, SR. TITLE: FIRE CHIEF ADDRESS: 103 E HOWARD STREET PO BOX 3548 CITY/ST/ZIP/CO: HAMPTON, VA 23663-0548	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JOHN R. COOKE  TITLE: DEP. FIRE CHIEF  ADDRESS: 441 SUMMER DRIVE  CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23606 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: JOHN R. COOKE TITLE: DEP. FIRE CHIEF ADDRESS: 441 SUMMER DRIVE CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23606	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: JOHN R. COOKE TITLE: DEP. FIRE CHIEF ADDRESS: 441 SUMMER DRIVE CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23606	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JOHN ANTHONY BARNETT  TITLE: STATISTICIAN  ADDRESS: 202 S. SURRY STREET  CITY/ST/ZIP/CO: HAMPTON, VA 23663 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: JOHN ANTHONY BARNETT TITLE: STATISTICIAN ADDRESS: 202 S. SURRY STREET CITY/ST/ZIP/CO: HAMPTON, VA 23663	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME: JOHN ANTHONY BARNETT TITLE: STATISTICIAN ADDRESS: 202 S. SURRY STREET CITY/ST/ZIP/CO: HAMPTON, VA 23663	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR			

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HENRY CHARLES BEIMLER, III CAPTAIN 34 BONAIRE DRIVE HAMPTON, VA 23669	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ROGER BRIAN BISHOP, JR LIEUTENANT 103 E. HOWARD STREET HAMPTON, VA 23663-1845	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES RONALD COLLINS CHIEF ENGINEER 311 FALMOUTH TURNING HAMPTON, VA 23669	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BRYANT D. HOLLAND ASST SECRETARY 217 TERREBONNE RD YORKTOWN, VA 23692	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SCOTT M. DOGGETTE CAPTAIN 6 STRATFORD RD NEWPORT NEWS, VA 23601	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ERNEST L. HALE CHAPLAIN 36 AMBROSE LANE HAMPTON, VA 23663	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANDREW WILLIAM WRIGHT SECRETARY 103 VILLA WAY YORKTOWN, VA 23693	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ JOHN ALEXANDER CIZMAR, SR.	JOHN ALEXANDER CIZMAR, SR., FIRE CHIEF	7/3/2013 DATE	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		PRINTED NAME AND CORPORATE TITLE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			